NH POLICE STANDARDS & TRAINING COUNCIL EMPLOYEE STATUS NOTIFICATION FORM "B"

PLEASE PRINT OR TYPE 2. Last Name 1. Social Security No. First Name Middle Initial 3. Date of Birth 4. Department 5. Department Address 6. Effective Date of Change noted in Section 1 or 2 below SECTION 1 The employment status of the above-named officer was: full-time \square part-time \square prior to submission of this status change notification form. The above-named officer: (check appropriate box) a. \square has been assigned to full-time duty status from part-time duty status* b. ☐ has been assigned to part-time duty status from full-time duty status* c. failed to successfully complete probationary period f. ordinary resignation e. has been discharged g. \square negotiated resignation h. ordinary retirement i. ☐ disability retirement j. ☐ died k. □ resigned in lieu of dismissal 1. □ suspended for days m. □ other *If a. or b. checked above, please note: 1. Upon assignment to full-time duty status from part-time duty status, a Form "A" should be submitted with this Form "B". 2. Upon assignment to part-time duty status from full-time duty status, a Form "A" should be submitted with this Form "B". SECTION 2 This officer promoted to rank of ______ effective on date noted in Item 6 above. This officer demoted to rank of effective on date noted in Item 6 above. SECTION 3 Please note the following name change: First: Last: Reason: Signature of Hiring Authority (no stamp)____

Title _____